

ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD
1740 W. ADAMS ST., SUITE 4600, PHOENIX, ARIZONA 85007
PHONE (602) 364-1PET (1738) FAX (602) 364-1039
VETBOARD.AZ.GOV

COMPLAINT INVESTIGATION FORM

If there is an issue with more than one veterinarian please file a separate Complaint Investigation Form for each veterinarian

PLEASE PRINT OR TYPE

FOR OFFICE USE ONLY

Date Received: OCT. 21, 2019

Case Number: 20-42

A. THIS COMPLAINT IS FILED AGAINST THE FOLLOWING:

Name of Veterinarian/CVT: VIRGINIA KERN

Premise Name: EAST MESA ANIMAL HOSPITAL

Premise Address: 430 SOUTH GILBERT ROAD

City: MESA State: AZ Zip Code: 85204

Telephone: (480) 833-8562

B. INFORMATION REGARDING THE INDIVIDUAL FILING COMPLAINT*:

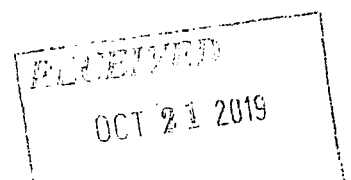
Name: DEBRA MEADOWS

Address:

City: State: Zip Code:

Home Telephone: Cell Telephone:

*STATE LAW REQUIRES WE HAVE TO DISCLOSE YOUR NAME UNLESS WE CAN SHOW THAT DISCLOSURE WILL RESULT IN SUBSTANTIAL HARM TO YOU, SOMEONE ELSE OR THE PUBLIC PER A.R.S. § 41-1010. IF YOU HAVE REASON TO BELIEVE THAT SUBSTANTIAL HARM WILL RESULT IN DISCLOSURE OF YOUR NAME PLEASE PROVIDE COPIES OF RESTRAINING ORDERS OR OTHER DOCUMENTATION.



C. PATIENT INFORMATION (1):

Name: SADIE MEADOWS

Breed/Species: LABRADOR

Age: 9 YEARS Sex: FEMALE Color: BLONDE

PATIENT INFORMATION (2):

Name: _____

Breed/Species: _____

Age: _____ Sex: _____ Color: _____

D. VETERINARIANS WHO HAVE PROVIDED CARE TO THIS PET FOR THIS ISSUE:

Please provide the name, address and phone number for each veterinarian.

VIRGINIA KERN

E. WITNESS INFORMATION:

Please provide the name, address and phone number of each witness that has direct knowledge regarding this case.

STAFF EMPLOYEES AT FRONT DESK AND DANNY (VET ASSISTANT)

Attestation of Person Requesting Investigation

By signing this form, I declare that the information contained herein is true and accurate to the best of my knowledge. Further, I authorize the release of any and all medical records or information necessary to complete the investigation of this case.

Signature: Debra Meadows

Date: 10-18-19

F. ALLEGATIONS and/or CONCERNS:

Please provide all information that you feel is relevant to the complaint. This portion must be either typewritten or clearly printed in ink.

Sadie had dental cleaning appointment on 10/17/2019 and dropped off at 8:00 a.m. and was advised pickup time is 5:00 p.m. At arrival I was informed there was an emergency and Sadie was still in the procedure. I asked how long she had been in the procedure and the front desk employee stated she came on duty at 4:00 and she was in the procedure at that time. They asked if I wanted to speak with the Dr Kern and I said yes. She stated the procedure started around 3:00 so that puts Sadie at two hours of anesthesia for a dental cleaning. I chose to wait in the lobby and at 5:38 p.m. I received a phone call about one of Sadie's tooth and they did not want to extract it but instead refer me to an oral surgeon. I was aware of the tooth but was baffled at why I was called when I was in the lobby.

Starting at 6:00 p.m. I was told on several occasions that Sadie was awake, alert and doing fine by several staff members and Dr Kern. Approximately 7:00 p.m. I was told Sadie's temp and vitals will be taken and then released. At 7:30 Danny brought Sadie out and with a very harsh tone stated "you didn't give us enough time so she is leaving without her vitals checked".

Sadie was still extremely groggy and in a stupor (different from what I was told she was awake and alert) and I had to pick her up to put in car (70#). I monitored her all night long and my biggest concern was she was not drinking water. She would turn her head away and fought me when I looked at her mouth. By morning I started giving her small amounts of water with a syringe. I made an appointment with Sadie's previous veterinarian to check her vitals, mouth and overall well being.

The lack of communication, remark by Danny on no vitals taken to release her, the length of time Sadie was under anesthesia and her after procedure condition is highly suspicious. I am in shock that there are four additional complaints on Virginia Kern and question if once again she has failed procedure protocol.

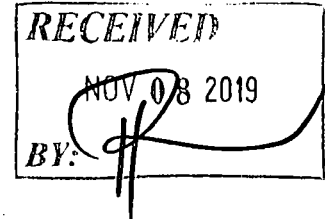
I respectfully request an investigation because Sadie has had previous dental cleanings and never came out in the condition like the procedure from Dr Kern

Thank you for your assistance

Debra Meadows

East Mesa Animal Hospital
430 S. Gilbert Rd.
Mesa, Az 85204

7 November 2019



Dear Sir/Madam: CASE #20-42

"Sadie" Meadows was admitted to East Mesa Animal Hospital on October 17, 2019 for a dental prophy. She was given 1.25cc Atropine, concentration was 0.54mg/cc, subcutaneous upon arrival. The dosage used was .016cc per pound. At 3pm, "Sadie" was examined by me and I determined she could have a general anesthetic for the procedure. She was given 20cc Propofol IV to effect. She was intubated with a #10 trach tube and hooked up to a closed anesthetic system with assist. The trach tube didn't seal so another #10 trach tube was used but it didn't seal as well. The 2nd tube was removed and another 10cc of Propofol was given to facilitate intubation with a #9 trach tube. It worked well so the procedure was continued. The dog was placed in lateral recumbency and a 22 gauge IV catheter was placed and connected to 1 liter of Normosol-R and the IV started. After the intercatheter was secured, she was placed in a ventral-dorsal position in a fiberglass trough. Warm bottles were placed on either side of the trough. Bubble wrap was used to maintain temperature and a warm towel was placed over the bubble wrap. The anesthesia was continued with Isoflurane and oxygen. The mouth was examined and noted she had a full mouth. Dental radiographs were taken with a Schick digital program. Roots all looked good.

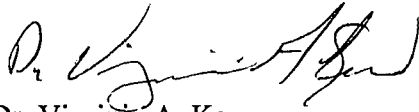
The teeth were cleaned with an IM3 dental machine. It was then noted that the upper 4th premolar on the right side had a slab fracture. I had Dr. Guminski call Ms. Meadows to let her know that the roots appeared intact and recommended a root canal otherwise the tooth would need to be extracted. She agreed with the root canal. The teeth were then polished, flushed with water then dried. Fluoride treatment was applied and allowed to set for five minutes. The mouth was flushed again with water and dried, then OraVet was applied. The isoflurane was shut off and oxygen continued. When eye reflex returned and had tongue movement, all the water bottles were removed and "Sadie" was placed in lateral recumbency. At that time the oxygen was discontinued since she was moving nicely. The owner then wanted to take the dog home and I told her "Sadie" could go home at 7pm, which was 1 hr later. She told the front desk she wanted "Sadie" brought up right away. The dog was removed from the table. When she was able to stand and walk, she was taken up front and given to the owner.

Dan told her the last TPR was not done, which was required in another five minutes. She insisted on leaving. Copy of post-op instructions were given to her as she was walking out the door. Verbally she was given a synopsis of the discharge instructions. Dr. Guminski tried to call her the following day but voice mail picked up. Total anesthesia was two hours. Total amount of fluids received was 250cc Normosol-R (I.V.).

She came in the following day to pay the bill but wanted a discount. She was told

there are no discounts for dentals and if she was so dissatisfied, she didn't have to pay the bill.

Sincerely,

A handwritten signature in cursive script, appearing to read "Dr. Virginia A. Kern". The signature is written in black ink and is positioned above the printed name.

Dr. Virginia A. Kern



ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

1740 W. ADAMS STREET, STE. 4600, PHOENIX, ARIZONA 85007

PHONE (602) 364-1-PET (1738) • FAX (602) 364-1039

VETBOARD.AZ.GOV

INVESTIGATIVE COMMITTEE REPORT

TO: Arizona Veterinary Medical Examining Board

FROM: PM Investigative Committee: Adam Almaraz - Chair
Amrit Rai, DVM
Brian Sidaway, DVM
Cameron Dow, DVM
William Hamilton

STAFF PRESENT: Tracy A. Riendeau, CVT – Investigations
Dawn Halbrook – Compliance Specialist
Mary Williams – Assistant Attorney General

RE: Case: 20-42
Complainant(s): Debra Meadows
Respondent(s): Virginia Kern, DVM (License: 0781)

SUMMARY:

Complaint Received at Board Office: 10/21/19
Committee Discussion: 1/7/20
Board IIR: 2/19/20

APPLICABLE STATUTES AND RULES:

Laws as Amended August 2018
Lime Green); Rules as Revised
September 2013 (Yellow)

On October 17, 2019, "Sadie," a 9-year-old female Labrador was presented to Respondent for a dental procedure. Respondent started the procedure later than expected therefore the dog could not be released at the time previously arranged with Complainant.

Complainant waited in the lobby while the dog recovered. Due to the prolonged wait time, Complainant insisted the dog be released.

On October 19, 2019, the dog was taken to Companion Pet Clinic for a post-dental evaluation due to decreased thirst and lethargy. Blood work was performed and the dog was discharged with instructions to return if symptoms worsened.

Complainant was noticed and did not appear.

Respondent was noticed and appeared with Counsel, David Stoll.

The Committee reviewed medical records, testimony, and other documentation as described below:

- Complainant(s) narrative: Debra Meadows
- Respondent(s) narrative/medical record: Virginia Kern, DVM
- Consulting Veterinarian(s) narrative/medical records: Brandon Young, DVM – Companion Pet Clinic

PROPOSED 'FINDINGS of FACT':

1. According to Respondent's associate, Dr. Guminski, she saw the dog on August 29, 2019 for possible allergies. There was also a concern regarding a dental and an ACL injury, which was being treated elsewhere with Carprofen and Robaxin. At the appointment, a dental estimate was provided with recommendations for blood work, which complainant declined citing that it had recently been performed.
2. On October 17, 2019, the dog was presented to Respondent for a dental; Complainant stated the dog was dropped off at 8:00am. According to Respondent, the dog was administered Atropine 1.25mLs (0.54mg/mL) SQ upon arrival.
3. At 3:00pm, Respondent stated that she examined the dog and determined the dog could undergo the anesthetic procedure. Upon exam, the dog had a weight = 71.1 pounds, a temperature = 99.8 degrees, a heart rate = 100bpm and a respiration rate = 30rpm. The dog was administered 20mLs propofol IV to effect; the dog required intubation several times due to endotracheal tubes not functioning therefore the dog required additional propofol (10mLs) to facilitate intubation. At this point, the dog was placed in lateral recumbency, an IV catheter was placed and the dog was started on a liter of Normosol-R. The dog was maintained on isoflurane and oxygen and warming techniques were applied to the dog for the duration of the dental.
4. Dental radiographs were performed and the dog's teeth were cleaned. Respondent performed an oral evaluation and noted a slab fracture to the right upper 4th premolar. Respondent had her associate, Dr. Guminski, call Complainant with the finding, explain that the roots appeared intact, and recommend extraction or referral for a root canal; Complainant agreed to the root canal referral. The dog's teeth were polished, flushed and fluoride treatment was applied. The dog was turned off anesthesia and left on oxygen until she began to recover. Once recovered (approximately 6:00pm), Complainant wanted to take the dog home. Respondent advised the dog could be released in an hour, around 7:00pm.
5. The surgical monitoring form shows the dog was under anesthesia from 3:40pm to 6:00pm. The dog's heart rate and respiration rate were not consistently recorded every 15 minutes as required.
6. Around 5:00pm, according to staff member, Ms. Bruno, Complainant arrived at the premises to pick up the dog. She was advised that the dog was not done due to a late start – Respondent had to attend to an emergency therefore surgeries were started later than expected. Respondent was notified that Complainant was asking about the dog therefore she spoke to Complainant, apologized for the delay, and explained they would call her when the dog was ready to be discharged. Complainant appeared satisfied with the explanation and left the premises.
7. A short time later, Complainant returned and elected to wait for the dog in the lobby. According to staff member, Ms. Grant, Complainant became anxious and was advised that the procedure was completed and the dog was recovering. A procedure was starting on another animal, and staff wanted to check the dog's vitals prior to her being discharged. Complainant became concerned and insisted on seeing the dog and taking her home, even though she was

advised the dog was not ready to be released. Once the dog was awake and able to walk, she was taken up front and given to Complainant. Complainant was provided with post-op instructions, did not pay for services as the bill was not finalized, and Complainant left the premises.

8. According to Complainant, the dog was released at 7:30pm and was still extremely groggy therefore Complainant had to pick her up and put her in the car. Complainant was concerned as she was told the dog was awake and alert. She was also told that the dog's vitals were not taken prior to being released.

9. On October 19, 2019, the dog was presented to Dr. Young at Companion Pet Clinic for decreased thirst and lethargy following the dental procedure. Dr. Young examined the dog, noted the slab fracture to tooth 108 and recommended evaluation by a dental specialist. Blood work was performed and Dr. Young recommended follow up care if the dog's signs persisted or worsened.

COMMITTEE DISCUSSION:

The Committee discussed that they could appreciate a pet owner insisting on having their pet returned to them, and when the pet does not do well, the pet owner perceives it was due to inappropriate medical care.

In this case, according to Complainant the dog's previous anesthetic procedures did not go this way; however, that is not an indicator on how future anesthetic events will happen. There is no evidence that anything medically appropriate occurred. The dog was able to walk out of the premises on his own, although could not get into the car without assistance but Complainant insisted the dog be released to her earlier than what Respondent would have liked.

COMMITTEE'S PROPOSED CONCLUSIONS of LAW:

The Committee concluded that no violations of the *Veterinary Practice Act* occurred.

COMMITTEE'S RECOMMENDED DISPOSITION:

Motion: It was moved and seconded the Board:

Dismiss this issue with no violation.

Vote: The motion was approved with a vote of 5 to 0.

The information contained in this report was obtained from the case file, which includes the complaint, the respondent's response, any consulting veterinarian or witness input, and any other sources used to gather information for the investigation.